

This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Tax Qualified.

**Maximum Policy Benefit Amounts**

- ☒ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☒ 4 Yrs.  
☒ 5 Yrs.      ☒ 6 Yrs.      ☐ 7 Yrs.      ☒ Lifetime  
☒ See company's notes, pp 103-121

**Elimination Periods**

- ☒ 0 days      ☒ 60 days      **TYPE**  
☐ 20 days      ☒ 90 days      ☐ Calendar Day  
☒ 30 days      ☐ 100 days      ☒ Service Day

**Nursing Home Daily Benefit Amounts**

\$50 minimum to \$300 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day      ☐ per week      ☐ per month  
☒ See notes, pp 103-121      ☐ Not Available

**Inflation Protection**

- ☒ 5% Compound      ☐ Guaranteed Purchase Option  
☒ 5% Simple      ☒ See company's notes, pp 103-121

**Home Care Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ 60%      ☒ 50%  
☐ See company's notes, pp 103-121

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ See company's notes, pp 103-121

**Waiver of Premium**

Premiums waived after 90 days of receiving covered services, regardless if the elimination period has been satisfied. Premium is waived for the entire policy, including any attached riders and spouse's premium if covered under the same policy.

### Annual premium amount for Comprehensive Long-Term Care Policy with a \$100 daily benefit amount.

30 Day Elimination Period.			90 Day Elimination Period.			90 Day Elimination Period.		
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit			Lifetime Benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	\$431	\$1,135	\$388	\$1,020		\$685	\$1,916	
55	\$571	\$1,429	\$514	\$1,285		\$903	\$2,375	
60	\$816	\$1,868	\$734	\$1,679		\$1,273	\$3,036	
65	\$1,230	\$2,505	\$1,106	\$2,251		\$1,887	\$3,994	
70	\$1,983	\$3,532	\$1,782	\$3,174		\$2,991	\$5,540	
75	\$3,184	\$5,045	\$2,862	\$4,535		\$4,666	\$7,663	
80	\$4,951	\$7,370	\$4,450	\$6,624		\$0	\$0	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Tax Qualified.

**Maximum Policy Benefit Amounts**

- ☐ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☒ 4 Yrs.  
☒ 5 Yrs.      ☐ 6 Yrs.      ☐ 7 Yrs.      ☐ Lifetime  
☐ See company's notes, pp 103-121

**Elimination Periods**

- ☒ 0 days      ☒ 60 days      **TYPE**  
☐ 20 days      ☒ 90 days      ☒ Calendar Day  
☒ 30 days      ☐ 100 days      ☐ Service Day

**Nursing Home Daily Benefit Amounts**

\$50 minimum to \$350 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day      ☐ per week      ☐ per month  
☐ See notes, pp 103-121      ☐ Not Available

**Inflation Protection**

- ☒ 5% Compound      ☐ Guaranteed Purchase Option  
☒ 5% Simple      ☐ See company's notes, pp 103-121

**Home Care Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ 60%      ☒ 50%  
☐ See company's notes, pp 103-121

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ See company's notes, pp 103-121

**Waiver of Premium**

waved following 90 consecutive days of nursing facility confinement OR on a quarterly basis after 30 days of covered care within 90 days.

### Annual premium amount for Comprehensive Long-Term Care Policy with a \$100 daily benefit amount.

30 Day Elimination Period.			90 Day Elimination Period.			90 Day Elimination Period.		
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit			Lifetime Benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	Not Available	<b>Not Available</b>	Not Available	<b>Not Available</b>		Not Available	<b>Not Available</b>	
55	\$582	<b>\$1,217</b>	\$529	<b>\$1,107</b>		\$861	<b>\$1,873</b>	
60	\$775	<b>\$1,533</b>	\$704	<b>\$1,394</b>		\$1,157	<b>\$2,365</b>	
65	\$1,147	<b>\$2,027</b>	\$1,043	<b>\$1,842</b>		\$1,727	<b>\$3,136</b>	
70	\$1,829	<b>\$3,052</b>	\$1,663	<b>\$2,774</b>		\$2,773	<b>\$4,735</b>	
75	\$2,946	<b>\$4,596</b>	\$2,678	<b>\$4,178</b>		\$4,483	<b>\$7,026</b>	
80	\$4,748	<b>\$6,575</b>	\$4,316	<b>\$5,978</b>		\$7,262	<b>\$10,061</b>	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Tax Qualified.

### Maximum Policy Benefit Amounts

- ☐ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☒ 4 Yrs.  
☒ 5 Yrs.      ☐ 6 Yrs.      ☐ 7 Yrs.      ☒ Lifetime  
☐ See company's notes, pp 103-121

### Elimination Periods

- ☒ 0 days      ☒ 60 days      **TYPE**  
☐ 20 days      ☒ 90 days      ☐ Calendar Day  
☒ 30 days      ☐ 100 days      ☐ Service Day

### Nursing Home Daily Benefit Amounts

\$50 minimum to \$350 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day      ☐ per week      ☐ per month  
☐ See notes, pp 103-121      ☐ Not Available

### Inflation Protection

- ☒ 5% Compound      ☒ Guaranteed Purchase Option  
☒ 5% Simple      ☐ See company's notes, pp 103-121

### Home Care Benefit Amounts

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ 60%      ☐ 50%  
☐ See company's notes, pp 103-121

### Residential Care Facility Daily Benefit Amounts

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ See company's notes, pp 103-121

### Waiver of Premium

Waived on a quarterly basis after receiving 15 days of covered care or services (home or facility) within 90 days.

## Annual premium amount for Comprehensive Long-Term Care Policy with a \$100 daily benefit amount.

30 Day Elimination Period.			90 Day Elimination Period.			90 Day Elimination Period.	
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit			Lifetime Benefit	
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection
50	Not Available	Not Available	Not Available	Not Available		Not Available	Not Available
55	\$652	\$1,364	\$592	\$1,240		\$921	\$2,004
60	\$868	\$1,717	\$789	\$1,561		\$1,238	\$2,530
65	\$1,284	\$2,270	\$1,168	\$2,064		\$1,848	\$3,355
70	\$2,067	\$3,448	\$1,879	\$3,135		\$2,995	\$5,114
75	\$3,329	\$5,193	\$3,026	\$4,721		\$4,842	\$7,588
80	\$5,365	\$7,430	\$4,877	\$6,755		\$7,843	\$10,866

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Tax Qualified.

**Maximum Policy Benefit Amounts**

- ☒ 1 Yr.    ☐ 2 Yrs.    ☐ 3 Yrs.    ☐ 4 Yrs.  
☐ 5 Yrs.    ☐ 6 Yrs.    ☐ 7 Yrs.    ☐ Lifetime  
☐ See company's notes, pp 103-121

**Elimination Periods**

- ☐ 0 days    ☒ 60 days    **TYPE**  
☐ 20 days    ☒ 90 days    ☐ Calendar Day  
☒ 30 days    ☐ 100 days    ☒ Service Day

**Nursing Home Daily Benefit Amounts**

\$50 minimum to \$250 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day    ☐ per week    ☐ per month  
☐ See notes, pp 103-121    ☐ Not Available

**Inflation Protection**

- ☒ 5% Compound    ☐ Guaranteed Purchase Option  
☐ 5% Simple    ☐ See company's notes, pp 103-121

**Home Care Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%    ☐ 90%    ☐ 80%    ☐ 75%  
☐ 70%    ☐ 60%    ☒ 50%  
☐ See company's notes, pp 103-121

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%    ☐ 90%    ☐ 80%    ☐ 75%  
☐ 70%    ☐ See company's notes, pp 103-121

**Waiver of Premium**

Premiums are waived after benefits have been paid for (90) consecutive days.

**Annual premium amount for Comprehensive Long-Term Care Policy  
with a \$100 daily benefit amount.**

30 Day Elimination Period.			90 Day Elimination Period.			90 Day Elimination Period.	
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit			Lifetime Benefit	
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection
50	\$460	<b>\$1,120</b>	\$400	<b>\$980</b>		\$640	<b>\$1,560</b>
55	\$620	<b>\$1,430</b>	\$540	<b>\$1,250</b>		\$860	<b>\$2,000</b>
60	\$890	<b>\$1,910</b>	\$780	<b>\$1,670</b>		\$1,250	<b>\$2,680</b>
65	\$1,390	<b>\$2,640</b>	\$1,220	<b>\$2,320</b>		\$1,890	<b>\$3,580</b>
70	\$2,270	<b>\$3,810</b>	\$1,990	<b>\$3,340</b>		\$2,900	<b>\$4,870</b>
75	\$3,920	<b>\$6,040</b>	\$3,440	<b>\$5,300</b>		\$5,150	<b>\$7,930</b>
80	\$6,370	<b>\$9,170</b>	\$5,590	<b>\$8,050</b>		\$8,310	<b>\$11,970</b>

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Tax Qualified.

**Maximum Policy Benefit Amounts**

- ☒ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☒ 4 Yrs.  
☒ 5 Yrs.      ☐ 6 Yrs.      ☐ 7 Yrs.      ☒ Lifetime  
☐ See company's notes, pp 103-121

**Elimination Periods**

- ☐ 0 days      ☒ 60 days      **TYPE**  
☐ 20 days      ☒ 90 days      ☐ Calendar Day  
☒ 30 days      ☐ 100 days      ☒ Service Day

**Nursing Home Daily Benefit Amounts**

\$50 minimum to \$500 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day      ☐ per week      ☐ per month  
☐ See notes, pp 103-121      ☐ Not Available

**Inflation Protection**

- ☒ 5% Compound      ☐ Guaranteed Purchase Option  
☐ 5% Simple      ☒ See company's notes, pp 103-121

**Home Care Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☒ 75%  
☐ 70%      ☐ 60%      ☒ 50%  
☒ See company's notes, pp 103-121

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ See company's notes, pp 103-121

**Waiver of Premium**

During a period of care, premiums are waived on monthly basis if: 1) certified as chronically ill ;2) have plan of care; 3) satisfied elimination period; & 4) receiving benefits. Surviving spouse/partner waiver waives prems. if have identical policies.

### Annual premium amount for Comprehensive Long-Term Care Policy with a \$100 daily benefit amount.

30 Day Elimination Period.			90 Day Elimination Period.			90 Day Elimination Period.		
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit			Lifetime Benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	Not Available	\$994	\$340	\$887		\$640	\$1,670	
55	Not Available	\$1,210	\$450	\$1,080		\$820	\$1,968	
60	Not Available	\$1,576	\$670	\$1,407		\$1,240	\$2,604	
65	Not Available	\$2,096	\$990	\$1,871		\$1,840	\$3,478	
70	Not Available	\$2,901	\$1,570	\$2,591		\$2,910	\$4,802	
75	Not Available	\$3,972	\$2,480	\$3,546		\$4,510	\$6,449	
80	Not Available	\$5,924	\$4,100	\$5,289		\$7,470	\$9,636	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Tax Qualified.

**Maximum Policy Benefit Amounts**

- ☐ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☒ 4 Yrs.  
☐ 5 Yrs.      ☒ 6 Yrs.      ☐ 7 Yrs.      ☒ Lifetime  
☐ See company's notes, pp 103-121

**Nursing Home Daily Benefit Amounts**

\$50 minimum to \$250 maximum per [day, week or month] offered in increments of \$1.

- ☒ per day      ☐ per week      ☐ per month  
☐ See notes, pp 103-121      ☐ Not Available

**Home Care Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ 60%      ☐ 50%  
☐ See company's notes, pp 103-121

**Elimination Periods**

- ☐ 0 days      ☐ 60 days      ☐ TYPE  
☐ 20 days      ☐ 90 days      ☐ Calendar Day  
☒ 30 days      ☒ 100 days      ☐ Service Day

**Inflation Protection**

- ☒ 5% Compound      ☐ Guaranteed Purchase Option  
☒ 5% Simple      ☒ See company's notes, pp 103-121

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ See company's notes, pp 103-121

**Waiver of Premium**

Waiver of premium applies once the elimination period has been satisfied.

### Annual premium amount for Comprehensive Long-Term Care Policy with a \$100 daily benefit amount.

30 Day Elimination Period.			100** Day Elimination Period.			100** Day Elimination Period.		
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit			Lifetime Benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	Not Available	\$0	\$410	\$840		\$660	\$1,330	
55	Not Available	\$0	\$480	\$950		\$800	\$1,580	
60	Not Available	\$0	\$680	\$1,260		\$1,100	\$2,110	
65	Not Available	\$0	\$970	\$1,720		\$1,600	\$2,960	
70	Not Available	\$0	\$1,510	\$2,460		\$2,490	\$4,140	
75	Not Available	\$0	\$2,510	\$3,790		\$4,080	\$6,300	
80	Not Available	\$0	\$4,030	\$5,590		\$6,300	\$9,250	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Tax Qualified.

**Maximum Policy Benefit Amounts**

- ☐ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☒ 4 Yrs.  
☐ 5 Yrs.      ☒ 6 Yrs.      ☐ 7 Yrs.      ☒ Lifetime  
☐ See company's notes, pp 103-121

**Nursing Home Daily Benefit Amounts**

\$50 minimum to \$250 maximum per [day, week or month] offered in increments of \$1.

- ☒ per day      ☐ per week      ☐ per month  
☐ See notes, pp 103-121      ☐ Not Available

**Home Care Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ 60%      ☐ 50%  
☒ See company's notes, pp 103-121

**Elimination Periods**

- ☐ 0 days      ☐ 60 days      ☐ TYPE  
☐ 20 days      ☒ 90 days      ☐ Calendar Day  
☒ 30 days      ☐ 100 days      ☐ Service Day

**Inflation Protection**

- ☒ 5% Compound      ☐ Guaranteed Purchase Option  
☒ 5% Simple      ☒ See company's notes, pp 103-121

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ See company's notes, pp 103-121

**Waiver of Premium**

Waiver of premium applies once the elimination period has been satisfied.

### Annual premium amount for Comprehensive Long-Term Care Policy with a \$100 daily benefit amount.

30 Day Elimination Period.			90 Day Elimination Period.			90 Day Elimination Period.		
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit			Lifetime Benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	\$590	\$1,102	\$500	\$1,020		\$810	\$1,630	
55	\$700	\$1,310	\$580	\$1,180		\$990	\$1,950	
60	\$1,010	\$1,750	\$840	\$1,560		\$1,360	\$2,600	
65	\$1,440	\$2,380	\$1,210	\$2,130		\$1,990	\$3,670	
70	\$2,310	\$3,560	\$1,950	\$3,190		\$3,230	\$5,370	
75	\$3,890	\$5,490	\$3,260	\$4,940		\$5,310	\$8,210	
80	\$6,240	\$8,130	\$5,270	\$7,320		\$8,230	\$12,090	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Tax Qualified.

**Maximum Policy Benefit Amounts**

- ☐ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☒ 4 Yrs.  
☒ 5 Yrs.      ☒ 6 Yrs.      ☐ 7 Yrs.      ☒ Lifetime  
☐ See company's notes, pp 103-121

**Nursing Home Daily Benefit Amounts**

\$50 minimum to \$250 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day      ☐ per week      ☐ per month  
☐ See notes, pp 103-121      ☐ Not Available

**Home Care Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☒ 80%      ☐ 75%  
☐ 70%      ☐ 60%      ☒ 50%  
☐ See company's notes, pp 103-121

**Elimination Periods**

- ☒ 0 days      ☒ 60 days        
☒ 20 days      ☒ 90 days      ☐ Calendar Day  
☐ 30 days      ☐ 100 days      ☐ Service Day

**Inflation Protection**

- ☒ 5% Compound      ☐ Guaranteed Purchase Option  
☒ 5% Simple      ☒ See company's notes, pp 103-121

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ See company's notes, pp 103-121

**Waiver of Premium**

We will waive any premium that becomes due after 12 days of covered Qualified Long Term Care services are provided during a Plan of Care. Days when covered services are received which are used to satisfy the Elimination Period can be used to satisfy the qualifications for this benefit. We will also refund the pro-rata portion of any premium You have paid for the period You qualify for waiver of premium. \* Also have Dual Waiver of Premium as an Optional Rider.

**Annual premium amount for Comprehensive Long-Term Care Policy  
with a \$100 daily benefit amount.**

20* Day Elimination Period.			90 Day Elimination Period.			90 Day Elimination Period.		
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit			Lifetime Benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	\$518	\$1,083	\$448	\$937		\$747	\$1,561	
55	\$643	\$1,280	\$556	\$1,107		\$913	\$1,817	
60	\$893	\$1,714	\$772	\$1,482		\$1,278	\$2,454	
65	\$1,296	\$2,385	\$1,121	\$2,062		\$1,801	\$3,314	
70	\$1,987	\$3,398	\$1,718	\$2,938		\$2,739	\$4,684	
75	\$3,466	\$5,302	\$2,996	\$4,584		\$4,764	\$7,289	
80	\$5,549	\$7,713	\$4,797	\$6,668		\$7,561	\$10,510	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.



This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Tax Qualified.

**Maximum Policy Benefit Amounts**

- ☒ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☒ 4 Yrs.  
☒ 5 Yrs.      ☒ 6 Yrs.      ☐ 7 Yrs.      ☒ Lifetime  
☒ See company's notes, pp 103-121

**Nursing Home Daily Benefit Amounts**

\$100 minimum to \$500 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day      ☐ per week      ☐ per month  
☒ See notes, pp 103-121      ☐ Not Available

**Home Care Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☒ 80%      ☐ 75%  
☐ 70%      ☐ 60%      ☒ 50%  
☒ See company's notes, pp 103-121

**Elimination Periods**

- ☐ 0 days      ☒ 60 days      **TYPE**  
☐ 20 days      ☒ 90 days      ☐ Calendar Day  
☒ 30 days      ☐ 100 days      ☒ Service Day

**Inflation Protection**

- ☒ 5% Compound      ☐ Guaranteed Purchase Option  
☒ 5% Simple      ☒ See company's notes, pp 103-121

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☒ 70%      ☐ See company's notes, pp 103-121

**Waiver of Premium**

While receiving benefits and after the satisfaction of the elimination period.

### Annual premium amount for Comprehensive Long-Term Care Policy with a \$100 daily benefit amount.

30 Day Elimination Period.			90 Day Elimination Period.			90 Day Elimination Period.		
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit			Lifetime Benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	\$528	\$1,452	\$440	\$1,210		\$700	\$1,930	
55	\$660	\$1,764	\$550	\$1,470		\$840	\$2,330	
60	\$888	\$2,064	\$740	\$1,720		\$1,180	\$2,680	
65	\$1,260	\$2,616	\$1,050	\$2,180		\$1,670	\$3,490	
70	\$2,088	\$3,444	\$1,740	\$2,870		\$2,790	\$4,780	
75	\$3,492	\$5,484	\$2,910	\$4,570		\$4,610	\$7,470	
80	\$5,700	\$8,496	\$4,750	\$7,080		Not Available	Not Available	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Tax Qualified.

**Maximum Policy Benefit Amounts**

- ☐ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☒ 4 Yrs.  
☐ 5 Yrs.      ☐ 6 Yrs.      ☐ 7 Yrs.      ☒ Lifetime  
☒ See company's notes, pp 103-121

**Elimination Periods**

- ☒ 0 days      ☐ 60 days      **TYPE**  
☐ 20 days      ☒ 90 days      ☐ Calendar Day  
☒ 30 days      ☐ 100 days      ☒ Service Day

**Nursing Home Daily Benefit Amounts**

\$50 minimum to \$250 maximum per [day, week or month] offered in increments of \$5.

- ☒ per day      ☐ per week      ☐ per month  
☒ See notes, pp 103-121      ☐ Not Available

**Inflation Protection**

- ☒ 5% Compound      ☒ Guaranteed Purchase Option  
☒ 5% Simple      ☐ See company's notes, pp 103-121

**Home Care Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☒ 90%      ☒ 80%      ☒ 75%  
☒ 70%      ☒ 60%      ☒ 50%  
☒ See company's notes, pp 103-121

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ See company's notes, pp 103-121

**Waiver of Premium**

Premiums waived after 91 consecutive service days.

### Annual premium amount for Comprehensive Long-Term Care Policy with a \$100 daily benefit amount.

30 Day Elimination Period.			90 Day Elimination Period.			90 Day Elimination Period.		
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit			Lifetime Benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	\$306	\$631	\$274	\$564		\$470	\$968	
55	\$383	\$790	\$343	\$708		\$589	\$1,215	
60	\$585	\$1,203	\$524	\$1,077		\$834	\$1,715	
65	\$969	\$1,881	\$868	\$1,685		\$1,219	\$2,366	
70	\$1,773	\$3,155	\$1,588	\$2,826		\$2,039	\$3,628	
75	\$3,372	\$5,328	\$3,020	\$4,772		\$3,680	\$5,815	
80	Not Available	Not Available	Not Available	Not Available		Not Available	\$0	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Tax Qualified.

**Maximum Policy Benefit Amounts**

- ☐ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☒ 4 Yrs.  
☒ 5 Yrs.      ☒ 6 Yrs.      ☐ 7 Yrs.      ☒ Lifetime  
☒ See company's notes, pp 103-121

**Elimination Periods**

- ☒ 0 days      ☒ 60 days      **TYPE**  
☐ 20 days      ☒ 90 days      ☐ Calendar Day  
☒ 30 days      ☐ 100 days      ☒ Service Day

**Nursing Home Daily Benefit Amounts**

\$50 minimum to \$300 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day      ☐ per week      ☐ per month  
☒ See notes, pp 103-121      ☐ Not Available

**Inflation Protection**

- ☒ 5% Compound      ☐ Guaranteed Purchase Option  
☒ 5% Simple      ☒ See company's notes, pp 103-121

**Home Care Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☒ 90%      ☒ 80%      ☒ 75%  
☒ 70%      ☒ 60%      ☒ 50%  
☒ See company's notes, pp 103-121

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☒ 90%      ☒ 80%      ☒ 75%  
☒ 70%      ☒ See company's notes, pp 103-121

**Waiver of Premium**

Waiver available for NF, RCF, HHC w/ prem waived for life if NF-confined for 180 consec. days. Joint Waiver (spouse prem waived while insured NF-confined) and Survivorship (sps. prem waived for life upon death of insured) available to couples at add'l premium.

### Annual premium amount for Comprehensive Long-Term Care Policy with a \$100 daily benefit amount.

30 Day Elimination Period.			90 Day Elimination Period.			90 Day Elimination Period.		
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit			Lifetime Benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	\$584	\$1,670	\$479	\$1,372		\$988	\$2,827	
55	\$742	\$1,976	\$609	\$1,622		\$1,147	\$3,054	
60	\$920	\$2,213	\$755	\$1,818		\$1,552	\$3,735	
65	\$1,296	\$2,720	\$1,064	\$2,234		\$2,328	\$4,887	
70	\$2,027	\$3,653	\$1,665	\$3,001		\$3,686	\$6,643	
75	\$3,412	\$5,304	\$2,803	\$4,356		\$6,702	\$10,419	
80	\$0	\$0	\$4,760	\$6,598		\$0	\$0	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Tax Qualified.

### Maximum Policy Benefit Amounts

- ☐ 1 Yr.    ☐ 2 Yrs.    ☒ 3 Yrs.    ☐ 4 Yrs.  
☒ 5 Yrs.    ☐ 6 Yrs.    ☐ 7 Yrs.    ☒ Lifetime  
☐ See company's notes, pp 103-121

### Elimination Periods

- ☒ 0 days    ☐ 60 days    TYPE  
☐ 20 days    ☒ 90 days    ☐ Calendar Day  
☒ 30 days    ☐ 100 days    ☒ Service Day

### Nursing Home Daily Benefit Amounts

\$50 minimum to \$250 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day    ☐ per week    ☐ per month  
☐ See notes, pp 103-121    ☐ Not Available

### Inflation Protection

- ☒ 5% Compound    ☐ Guaranteed Purchase Option  
☐ 5% Simple    ☒ See company's notes, pp 103-121

### Home Care Benefit Amounts

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%    ☐ 90%    ☐ 80%    ☐ 75%  
☐ 70%    ☐ 60%    ☒ 50%  
☐ See company's notes, pp 103-121

### Residential Care Facility Daily Benefit Amounts

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%    ☐ 90%    ☐ 80%    ☐ 75%  
☐ 70%    ☐ See company's notes, pp 103-121

### Waiver of Premium

After confinement in a Nursing Facility or Residential Care Facility for a period of 60 days; days need not be consecutive.

## Annual premium amount for Comprehensive Long-Term Care Policy with a \$100 daily benefit amount.

30 Day Elimination Period.			90 Day Elimination Period.			90 Day Elimination Period.		
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit			Lifetime Benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	\$312	<b>\$795</b>	\$284	<b>\$723</b>		\$405	<b>\$1,033</b>	
55	\$416	<b>\$873</b>	\$378	<b>\$794</b>		\$540	<b>\$1,134</b>	
60	\$624	<b>\$998</b>	\$567	<b>\$907</b>		\$810	<b>\$1,296</b>	
65	\$970	<b>\$1,455</b>	\$882	<b>\$1,323</b>		\$1,260	<b>\$1,890</b>	
70	\$1,663	<b>\$2,328</b>	\$1,512	<b>\$2,117</b>		\$2,160	<b>\$3,024</b>	
75	\$2,703	<b>\$3,514</b>	\$2,457	<b>\$3,194</b>		\$3,510	<b>\$4,563</b>	
80	\$4,782	<b>\$5,977</b>	\$4,347	<b>\$5,434</b>		\$6,210	<b>\$7,762</b>	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Tax Qualified.

**Maximum Policy Benefit Amounts**

- ☐ 1 Yr.    ☐ 2 Yrs.    ☒ 3 Yrs.    ☐ 4 Yrs.  
☐ 5 Yrs.    ☒ 6 Yrs.    ☐ 7 Yrs.    ☒ Lifetime  
☐ See company's notes, pp 103-121

**Elimination Periods**

- ☒ 0 days    ☐ 60 days    ☐ TYPE  
☐ 20 days    ☒ 90 days    ☐ Calendar Day  
☒ 30 days    ☐ 100 days    ☒ Service Day

**Nursing Home Daily Benefit Amounts**

\$50 minimum to \$300 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day    ☐ per week    ☐ per month  
☐ See notes, pp 103-121    ☐ Not Available

**Inflation Protection**

- ☒ 5% Compound    ☐ Guaranteed Purchase Option  
☒ 5% Simple    ☒ See company's notes, pp 103-121

**Home Care Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%    ☐ 90%    ☐ 80%    ☐ 75%  
☐ 70%    ☐ 60%    ☐ 50%  
☐ See company's notes, pp 103-121

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%    ☐ 90%    ☐ 80%    ☐ 75%  
☐ 70%    ☐ See company's notes, pp 103-121

**Waiver of Premium**

provided after confinement in a Nursing Facility or Residential Care Facility for a period of 90 days, need not be consecutive days.

**Annual premium amount for Comprehensive Long-Term Care Policy with a \$100 daily benefit amount.**

30 Day Elimination Period.			90 Day Elimination Period.			90 Day Elimination Period.		
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit			Lifetime Benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	\$311	\$933	\$270	\$811		\$416	\$1,248	
55	\$389	\$1,049	\$338	\$913		\$520	\$1,404	
60	\$490	\$1,152	\$426	\$1,002		\$656	\$1,542	
65	\$789	\$1,579	\$686	\$1,373		\$1,056	\$2,112	
70	\$1,375	\$2,379	\$1,196	\$2,069		\$1,840	\$3,183	
75	\$2,392	\$3,827	\$2,080	\$3,328		\$3,200	\$5,120	
80	\$4,306	\$6,458	\$3,744	\$5,616		\$5,760	\$8,640	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Tax Qualified.

### Maximum Policy Benefit Amounts

- ☐ 1 Yr.    ☒ 2 Yrs.    ☒ 3 Yrs.    ☒ 4 Yrs.  
☒ 5 Yrs.    ☐ 6 Yrs.    ☐ 7 Yrs.    ☒ Lifetime  
☐ See company's notes, pp 103-121

### Elimination Periods

- ☒ 0 days    ☐ 60 days    ☐ TYPE  
☐ 20 days    ☐ 90 days    ☐ Calendar Day  
☒ 30 days    ☐ 100 days    ☒ Service Day

### Nursing Home Daily Benefit Amounts

\$50 minimum to \$300 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day    ☐ per week    ☐ per month  
☐ See notes, pp 103-121    ☐ Not Available

### Inflation Protection

- ☒ 5% Compound    ☐ Guaranteed Purchase Option  
☐ 5% Simple    ☒ See company's notes, pp 103-121

### Home Care Benefit Amounts

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☐ 100%    ☐ 90%    ☐ 80%    ☐ 75%  
☐ 70%    ☐ 60%    ☐ 50%  
☒ See company's notes, pp 103-121

### Residential Care Facility Daily Benefit Amounts

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%    ☐ 90%    ☐ 80%    ☐ 75%  
☐ 70%    ☐ See company's notes, pp 103-121

### Waiver of Premium

Nursing and Residential Care Facilities Waiver: Premiums will be waived when we begin paying benefits and premium payments will resume following the date we stop paying benefits. Home Care Waiver: After paying benefits on a regular basis ( twelve or more days per month) premiums will be waived until benefits are no longer being paid on a regular basis.

**Annual premium amount for Comprehensive Long-Term Care Policy  
with a \$100 daily benefit amount.**

30 Day Elimination Period.			30** Day Elimination Period.		30** Day Elimination Period.	
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit		Lifetime Benefit	
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection
50	\$510	<b>\$1,120</b>	Not Available	<b>Not Available</b>	Not Available	<b>Not Available</b>
55	\$560	<b>\$1,200</b>	Not Available	<b>Not Available</b>	Not Available	<b>Not Available</b>
60	\$780	<b>\$1,480</b>	Not Available	<b>Not Available</b>	Not Available	<b>Not Available</b>
65	\$1,230	<b>\$2,190</b>	Not Available	<b>Not Available</b>	Not Available	<b>Not Available</b>
70	\$1,990	<b>\$3,340</b>	Not Available	<b>Not Available</b>	Not Available	<b>Not Available</b>
75	\$3,410	<b>\$5,380</b>	Not Available	<b>Not Available</b>	Not Available	<b>Not Available</b>
80	\$5,560	<b>\$8,230</b>	Not Available	<b>Not Available</b>	Not Available	<b>Not Available</b>

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Tax Qualified.

### Maximum Policy Benefit Amounts

- ☐ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☒ 4 Yrs.  
☒ 5 Yrs.      ☐ 6 Yrs.      ☒ 7 Yrs.      ☒ Lifetime  
☐ See company's notes, pp 103-121

### Elimination Periods

- ☐ 0 days      ☐ 60 days      **TYPE**  
☒ 20 days      ☐ 90 days      ☐ Calendar Day  
☐ 30 days      ☒ 100 days      ☒ Service Day

### Nursing Home Daily Benefit Amounts

\$90 minimum to \$400 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day      ☐ per week      ☐ per month  
☐ See notes, pp 103-121      ☐ Not Available

### Inflation Protection

- ☒ 5% Compound      ☐ Guaranteed Purchase Option  
☒ 5% Simple      ☐ See company's notes, pp 103-121

### Home Care Benefit Amounts

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☒ 75%  
☐ 70%      ☐ 60%      ☒ 50%  
☐ See company's notes, pp 103-121

### Residential Care Facility Daily Benefit Amounts

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☒ 75%  
☐ 70%      ☒ See company's notes, pp 103-121

### Waiver of Premium

Takes effect upon benefit eligibility (after elimination period is satisfied).

## Annual premium amount for Comprehensive Long-Term Care Policy with a \$100 daily benefit amount.

20* Day Elimination Period.			100** Day Elimination Period.			100** Day Elimination Period.	
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit			Lifetime Benefit	
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection
50	\$481	\$1,087	\$418	\$945		\$686	\$1,550
55	\$585	\$1,306	\$509	\$1,136		\$834	\$1,862
60	\$785	\$1,658	\$683	\$1,442		\$1,119	\$2,364
65	\$1,228	\$2,298	\$1,068	\$1,998		\$1,750	\$3,276
70	\$2,098	\$3,447	\$1,824	\$2,998		\$2,990	\$4,914
75	\$3,809	\$5,607	\$3,313	\$4,875		\$5,431	\$7,993
80	\$6,661	\$8,883	\$5,792	\$7,724		Not Available	Not Available

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

[\* Carrier does not offer a 30-day elimination period.]

[\*\* Carrier does not offer a 90-day elimination period.]

This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Tax Qualified.

### Maximum Policy Benefit Amounts

- ☒ 1 Yr.    ☒ 2 Yrs.    ☒ 3 Yrs.    ☒ 4 Yrs.  
☒ 5 Yrs.    ☐ 6 Yrs.    ☒ 7 Yrs.    ☐ Lifetime  
☐ See company's notes, pp 103-121

### Elimination Periods

- ☐ 0 days    ☐ 60 days    ☐ TYPE  
☒ 20 days    ☐ 90 days    ☒ Calendar Day  
☐ 30 days    ☒ 100 days    ☐ Service Day

### Nursing Home Daily Benefit Amounts

\$90 minimum to \$400 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day    ☐ per week    ☐ per month  
☐ See notes, pp 103-121    ☐ Not Available

### Inflation Protection

- ☒ 5% Compound    ☐ Guaranteed Purchase Option  
☒ 5% Simple    ☐ See company's notes, pp 103-121

### Home Care Benefit Amounts

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%    ☐ 90%    ☐ 80%    ☒ 75%  
☐ 70%    ☐ 60%    ☒ 50%  
☐ See company's notes, pp 103-121

### Residential Care Facility Daily Benefit Amounts

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%    ☐ 90%    ☐ 80%    ☒ 75%  
☐ 70%    ☒ See company's notes, pp 103-121

### Waiver of Premium

Takes effect upon benefit eligibility (after elimination period is satisfied).

## Annual premium amount for Comprehensive Long-Term Care Policy with a \$100 daily benefit amount.

20* Day Elimination Period.			100** Day Elimination Period.			100** Day Elimination Period.	
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit			Lifetime Benefit	
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection
50	\$760	\$1,718	\$661	\$1,494		Not Available	Not Available
55	\$912	\$2,037	\$793	\$1,772		Not Available	Not Available
60	\$1,225	\$2,587	\$1,065	\$2,249		Not Available	Not Available
65	\$1,879	\$3,516	\$1,634	\$3,058		Not Available	Not Available
70	\$3,210	\$5,274	\$2,791	\$4,586		Not Available	Not Available
75	\$5,562	\$8,186	\$4,837	\$7,118		Not Available	Not Available
80	\$9,725	\$12,969	\$8,456	\$11,278		Not Available	Not Available

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

[\* Carrier does not offer a 30-day elimination period.]

[\*\* Carrier does not offer a 90-day elimination period.]



This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Tax Qualified.

### Maximum Policy Benefit Amounts

- ☐ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☒ 4 Yrs.  
☒ 5 Yrs.      ☐ 6 Yrs.      ☒ 7 Yrs.      ☒ Lifetime  
☐ See company's notes, pp 103-121

### Elimination Periods

- ☐ 0 days      ☐ 60 days      ☐ TYPE  
☒ 20 days      ☐ 90 days      ☐ Calendar Day  
☐ 30 days      ☒ 100 days      ☒ Service Day

### Nursing Home Daily Benefit Amounts

\$90 minimum to \$400 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day      ☐ per week      ☐ per month  
☐ See notes, pp 103-121      ☐ Not Available

### Inflation Protection

- ☒ 5% Compound      ☐ Guaranteed Purchase Option  
☒ 5% Simple      ☐ See company's notes, pp 103-121

### Home Care Benefit Amounts

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☒ 75%  
☐ 70%      ☐ 60%      ☐ 50%  
☐ See company's notes, pp 103-121

### Residential Care Facility Daily Benefit Amounts

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ See company's notes, pp 103-121

### Waiver of Premium

Takes effect upon benefit eligibility (after elimination period is satisfied).

## Annual premium amount for Comprehensive Long-Term Care Policy with a \$100 daily benefit amount.

20* Day Elimination Period.			100** Day Elimination Period.			100** Day Elimination Period.	
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit			Lifetime Benefit	
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection
50	\$447	\$1,011	\$389	\$879		\$638	\$1,441
55	\$544	\$1,215	\$473	\$1,056		\$775	\$1,731
60	\$730	\$1,542	\$635	\$1,341		\$1,041	\$2,198
65	\$1,142	\$2,137	\$993	\$1,859		\$1,628	\$3,047
70	\$1,951	\$3,206	\$1,697	\$2,788		\$2,781	\$4,570
75	\$3,543	\$5,214	\$3,081	\$4,534		\$5,051	\$7,433
80	\$6,195	\$8,261	\$5,387	\$7,184		Not Available	Not Available

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

[\* Carrier does not offer a 30-day elimination period.]

[\*\* Carrier does not offer a 90-day elimination period.]

This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Tax Qualified.

**Maximum Policy Benefit Amounts**

- ☐ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☒ 4 Yrs.  
☒ 5 Yrs.      ☒ 6 Yrs.      ☒ 7 Yrs.      ☒ Lifetime  
☒ See company's notes, pp 103-121

**Elimination Periods**

- ☒ 0 days      ☒ 60 days      **TYPE**  
☒ 20 days      ☐ 90 days      ☐ Calendar Day  
☐ 30 days      ☒ 100 days      ☒ Service Day

**Nursing Home Daily Benefit Amounts**

\$50 minimum to \$400 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day      ☐ per week      ☐ per month  
☐ See notes, pp 103-121      ☐ Not Available

**Inflation Protection**

- ☒ 5% Compound      ☒ Guaranteed Purchase Option  
☒ 5% Simple      ☒ See company's notes, pp 103-121

**Home Care Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☒ 75%  
☐ 70%      ☐ 60%      ☒ 50%  
☐ See company's notes, pp 103-121

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☒ 75%  
☐ 70%      ☐ See company's notes, pp 103-121

**Waiver of Premium**

Lifetime WP if in NH 180 days; Joint WP and Survivorship WP are available at extra cost.

## Annual premium amount for Comprehensive Long-Term Care Policy with a \$100 daily benefit amount.

20* Day Elimination Period.			100** Day Elimination Period.			100** Day Elimination Period.		
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit			Lifetime Benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	\$540	\$1,562	\$421	\$1,217		\$898	\$2,596	
55	\$687	\$1,849	\$536	\$1,441		\$1,043	\$2,804	
60	\$852	\$2,070	\$664	\$1,613		\$1,411	\$3,430	
65	\$1,200	\$2,544	\$935	\$1,982		\$2,117	\$4,489	
70	\$1,878	\$3,418	\$1,463	\$2,663		\$3,352	\$6,101	
75	\$3,161	\$4,962	\$2,463	\$3,866		\$6,095	\$9,569	
80	\$0	\$0	\$4,183	\$5,856		\$0	\$0	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

[\* Carrier does not offer a 30-day elimination period.]

[\*\* Carrier does not offer a 90-day elimination period.]

This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Tax Qualified.

### Maximum Policy Benefit Amounts

- ☒ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☐ 4 Yrs.  
☒ 5 Yrs.      ☐ 6 Yrs.      ☐ 7 Yrs.      ☒ Lifetime  
☐ See company's notes, pp 103-121

### Elimination Periods

- ☒ 0 days      ☐ 60 days      TYPE  
☒ 20 days      ☒ 90 days      ☐ Calendar Day  
☐ 30 days      ☐ 100 days      ☒ Service Day

### Nursing Home Daily Benefit Amounts

\$40 minimum to \$300 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day      ☐ per week      ☐ per month  
☐ See notes, pp 103-121      ☐ Not Available

### Inflation Protection

- ☒ 5% Compound      ☒ Guaranteed Purchase Option  
☒ 5% Simple      ☒ See company's notes, pp 103-121

### Home Care Benefit Amounts

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ 60%      ☒ 50%  
☐ See company's notes, pp 103-121

### Residential Care Facility Daily Benefit Amounts

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ See company's notes, pp 103-121

### Waiver of Premium

For Confined Care, prems are waived after 90 consecutive day of confinement beyond the Elim Period. For Home Care, prems are waived after covered home care services are rec'd on a regular basis (at least 3 days out of every 7) for 90 consecutive days

## Annual premium amount for Comprehensive Long-Term Care Policy with a \$100 daily benefit amount.

20* Day Elimination Period.			90 Day Elimination Period.		90 Day Elimination Period.	
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit		Lifetime Benefit	
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection
50	\$449	\$1,387	\$378	\$1,168	\$631	\$1,950
55	\$698	\$1,767	\$586	\$1,482	\$923	\$2,335
60	\$1,004	\$2,129	\$840	\$1,781	\$1,242	\$2,633
65	\$1,416	\$2,563	\$1,186	\$2,146	\$1,693	\$3,065
70	\$2,173	\$3,629	\$1,789	\$2,988	\$2,512	\$4,194
75	\$3,756	\$6,085	\$3,062	\$4,961	\$4,248	\$6,882
80	\$0	\$0	\$5,303	\$7,583	\$7,514	\$10,746

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Tax Qualified.

**Maximum Policy Benefit Amounts**

- ☐ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☒ 4 Yrs.  
☒ 5 Yrs.      ☐ 6 Yrs.      ☐ 7 Yrs.      ☒ Lifetime  
☐ See company's notes, pp 103-121

**Nursing Home Daily Benefit Amounts**

\$50 minimum to \$300 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day      ☐ per week      ☐ per month  
☐ See notes, pp 103-121      ☐ Not Available

**Home Care Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☐ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ 60%      ☐ 50%  
☒ See company's notes, pp 103-121

**Elimination Periods**

- ☒ 0 days      ☐ 60 days      ☐ TYPE  
☐ 20 days      ☐ 90 days      ☐ Calendar Day  
☒ 30 days      ☐ 100 days      ☒ Service Day

**Inflation Protection**

- ☒ 5% Compound      ☐ Guaranteed Purchase Option  
☐ 5% Simple      ☒ See company's notes, pp 103-121

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ See company's notes, pp 103-121

**Waiver of Premium**

Nursing and Residential Care Facilities Waiver: Premiums will be waived when we begin paying benefits and premium payments will resume following the date we stop paying benefits. Home Care Waiver: After paying benefits on a regular basis ( twelve or more days per month) premiums will be waived until benefits are no longer being paid on a regular basis.

**Annual premium amount for Comprehensive Long-Term Care Policy  
with a \$100 daily benefit amount.**

30 Day Elimination Period.			30** Day Elimination Period.		30** Day Elimination Period.	
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit		Lifetime Benefit	
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection
50	\$510	<b>\$1,120</b>	Not Available	<b>Not Available</b>	Not Available	<b>Not Available</b>
55	\$560	<b>\$1,200</b>	Not Available	<b>Not Available</b>	Not Available	<b>Not Available</b>
60	\$780	<b>\$1,480</b>	Not Available	<b>Not Available</b>	Not Available	<b>Not Available</b>
65	\$1,230	<b>\$2,190</b>	Not Available	<b>Not Available</b>	Not Available	<b>Not Available</b>
70	\$1,990	<b>\$3,340</b>	Not Available	<b>Not Available</b>	Not Available	<b>Not Available</b>
75	\$3,410	<b>\$5,380</b>	Not Available	<b>Not Available</b>	Not Available	<b>Not Available</b>
80	\$5,560	<b>\$8,230</b>	Not Available	<b>Not Available</b>	Not Available	<b>Not Available</b>

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Tax Qualified.

**Maximum Policy Benefit Amounts**

- ☐ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☒ 4 Yrs.  
☒ 5 Yrs.      ☐ 6 Yrs.      ☐ 7 Yrs.      ☒ Lifetime  
☐ See company's notes, pp 103-121

**Elimination Periods**

- ☐ 0 days      ☐ 60 days      ☐ TYPE  
☒ 20 days      ☒ 90 days      ☐ Calendar Day  
☐ 30 days      ☐ 100 days      ☒ Service Day

**Nursing Home Daily Benefit Amounts**

\$50 minimum to \$300 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day      ☐ per week      ☐ per month  
☐ See notes, pp 103-121      ☐ Not Available

**Inflation Protection**

- ☒ 5% Compound      ☒ Guaranteed Purchase Option  
☒ 5% Simple      ☒ See company's notes, pp 103-121

**Home Care Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☒ 90%      ☒ 80%      ☐ 75%  
☒ 70%      ☒ 60%      ☒ 50%  
☐ See company's notes, pp 103-121

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ See company's notes, pp 103-121

**Waiver of Premium**

If the optional Enhancement rider is attached to the policy, then premiums are waived as soon as benefits are paid under the Nursing Home or Home Care benefit. If the rider is not attached, then premiums are waived once benefits have been paid for 90 days for Nursing Home or Home Care service. This requirement must be satisfied once for each period of care.

**Annual premium amount for Comprehensive Long-Term Care Policy with a \$100 daily benefit amount.**

20* Day Elimination Period.			90 Day Elimination Period.			90 Day Elimination Period.		
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit			Lifetime Benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	\$397	\$1,125	\$326	\$922		\$494	\$1,449	
55	\$605	\$1,541	\$496	\$1,263		\$743	\$1,965	
60	\$853	\$1,976	\$699	\$1,619		\$1,034	\$2,490	
65	\$1,291	\$2,670	\$1,058	\$2,188		\$1,544	\$3,325	
70	\$2,021	\$3,719	\$1,657	\$3,048		\$2,390	\$4,599	
75	\$3,533	\$5,741	\$2,896	\$4,706		\$4,168	\$7,089	
80	\$5,791	\$8,464	\$4,747	\$6,938		\$6,795	\$10,341	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Tax Qualified.

### Maximum Policy Benefit Amounts

- ☐ 1 Yr.    ☐ 2 Yrs.    ☒ 3 Yrs.    ☐ 4 Yrs.  
☐ 5 Yrs.    ☒ 6 Yrs.    ☐ 7 Yrs.    ☒ Lifetime  
☒ See company's notes, pp 103-121

### Elimination Periods

- ☐ 0 days    ☐ 60 days    ☐ TYPE  
☐ 20 days    ☒ 90 days    ☒ Calendar Day  
☐ 30 days    ☐ 100 days    ☐ Service Day

### Nursing Home Daily Benefit Amounts

\$50 minimum to \$250 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day    ☐ per week    ☐ per month  
☐ See notes, pp 103-121    ☐ Not Available

### Inflation Protection

- ☒ 5% Compound    ☒ Guaranteed Purchase Option  
☐ 5% Simple    ☐ See company's notes, pp 103-121

### Home Care Benefit Amounts

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%    ☐ 90%    ☐ 80%    ☐ 75%  
☐ 70%    ☐ 60%    ☒ 50%  
☐ See company's notes, pp 103-121

### Residential Care Facility Daily Benefit Amounts

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%    ☐ 90%    ☐ 80%    ☐ 75%  
☐ 70%    ☐ See company's notes, pp 103-121

### Waiver of Premium

The Company will waive premiums on the policy when there are 91 days on which Qualifying Expenses are incurred, or the Beginning Date is met, if sooner.

## Annual premium amount for Comprehensive Long-Term Care Policy with a \$100 daily benefit amount.

45* Day Elimination Period.			90 Day Elimination Period.			90 Day Elimination Period.		
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit			Lifetime Benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	\$556	\$2,026	\$484	\$1,762		\$691	\$2,773	
55	\$687	\$2,168	\$598	\$1,885		\$862	\$2,963	
60	\$918	\$2,476	\$798	\$2,153		\$1,156	\$3,335	
65	\$1,272	\$2,945	\$1,106	\$2,561		\$1,607	\$3,929	
70	\$2,076	\$4,144	\$1,806	\$3,604		\$2,629	\$5,494	
75	\$3,431	\$5,956	\$2,984	\$5,179		\$4,341	\$7,855	
80	Not Available	Not Available	Not Available	Not Available		Not Available	Not Available	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

[\* Carrier does not offer a 30-day elimination period.]

This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Tax Qualified.

**Maximum Policy Benefit Amounts**

- ☐ 1 Yr.      ☐ 2 Yrs.      ☐ 3 Yrs.      ☐ 4 Yrs.  
☐ 5 Yrs.      ☐ 6 Yrs.      ☐ 7 Yrs.      ☒ Lifetime  
☒ See company's notes, pp 103-121

**Elimination Periods**

- ☒ 0 days      ☐ 60 days      ☐ TYPE  
☒ 20 days      ☒ 90 days      ☒ Calendar Day  
☐ 30 days      ☐ 100 days      ☐ Service Day

**Nursing Home Daily Benefit Amounts**

\$50 minimum to \$300 maximum per [day, week or month] offered in increments of \$25.

- ☒ per day      ☐ per week      ☐ per month  
☐ See notes, pp 103-121      ☐ Not Available

**Inflation Protection**

- ☒ 5% Compound      ☒ Guaranteed Purchase Option  
☐ 5% Simple      ☐ See company's notes, pp 103-121

**Home Care Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ 60%      ☐ 50%  
☐ See company's notes, pp 103-121

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ See company's notes, pp 103-121

**Waiver of Premium**

The insured must receive long term care benefits for 90 days before premiums are waived. Waived benefits will continue as long as the insured is receiving long term care benefits.

**Annual premium amount for Comprehensive Long-Term Care Policy  
with a \$100 daily benefit amount.**

20* Day Elimination Period.			90 Day Elimination Period.		90 Day Elimination Period.	
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit		Lifetime Benefit	
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection
50	Not Available	Not Available	Not Available	Not Available	\$304	\$617
55	Not Available	Not Available	Not Available	Not Available	\$332	\$674
60	Not Available	Not Available	Not Available	Not Available	\$443	\$837
65	Not Available	Not Available	Not Available	Not Available	\$753	\$1,288
70	Not Available	Not Available	Not Available	Not Available	\$1,273	\$1,973
75	Not Available	Not Available	Not Available	Not Available	\$2,053	\$2,915
80	Not Available	Not Available	Not Available	Not Available	\$3,407	\$4,634

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Tax Qualified.

**Maximum Policy Benefit Amounts**

- ☐ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☒ 4 Yrs.  
☒ 5 Yrs.      ☐ 6 Yrs.      ☐ 7 Yrs.      ☒ Lifetime  
☐ See company's notes, pp 103-121

**Elimination Periods**

- ☒ 0 days      ☒ 60 days      **TYPE**  
☐ 20 days      ☒ 90 days      ☒ Calendar Day  
☒ 30 days      ☐ 100 days      ☐ Service Day

**Nursing Home Daily Benefit Amounts**

\$1500 minimum to \$9000 maximum per [day, week or month] offered in increments of \$300.

- ☐ per day      ☐ per week      ☒ per month  
☐ See notes, pp 103-121      ☐ Not Available

**Inflation Protection**

- ☒ 5% Compound      ☒ Guaranteed Purchase Option  
☒ 5% Simple      ☐ See company's notes, pp 103-121

**Home Care Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☒ 75%  
☐ 70%      ☐ 60%      ☐ 50%  
☐ See company's notes, pp 103-121

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ See company's notes, pp 103-121

**Waiver of Premium**

Chronically ill individual for 6 months

### Annual premium amount for Comprehensive Long-Term Care Policy with a \$100 daily benefit amount.

30 Day Elimination Period.			90 Day Elimination Period.			90 Day Elimination Period.		
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit			Lifetime Benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	\$473	\$866	\$361	\$660		\$595	\$1,089	
55	\$565	\$1,018	\$430	\$776		\$759	\$1,368	
60	\$775	\$1,372	\$589	\$1,043		\$997	\$1,764	
65	\$1,122	\$1,919	\$846	\$1,446		\$1,398	\$2,391	
70	\$1,866	\$3,004	\$1,404	\$2,261		\$2,384	\$3,839	
75	\$3,296	\$4,779	\$2,490	\$3,611		\$4,141	\$6,005	
80	\$5,270	\$6,886	\$3,954	\$5,140		\$6,471	\$8,412	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.



This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Tax Qualified.

**Maximum Policy Benefit Amounts**

- ☐ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☐ 4 Yrs.  
☒ 5 Yrs.      ☐ 6 Yrs.      ☐ 7 Yrs.      ☒ Lifetime  
☒ See company's notes, pp 103-121

**Elimination Periods**

- ☐ 0 days      ☐ 60 days      **TYPE**  
☐ 20 days      ☒ 90 days      ☐ Calendar Day  
☒ 30 days      ☐ 100 days      ☐ Service Day

**Nursing Home Daily Benefit Amounts**

\$75 minimum to \$400 maximum per [day, week or month] offered in increments of \$25.

- ☒ per day      ☐ per week      ☐ per month  
☐ See notes, pp 103-121      ☐ Not Available

**Inflation Protection**

- ☒ 5% Compound      ☐ Guaranteed Purchase Option  
☒ 5% Simple      ☐ See company's notes, pp 103-121

**Home Care Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ 60%      ☐ 50%  
☐ See company's notes, pp 103-121

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ See company's notes, pp 103-121

**Waiver of Premium**

Premiums are waived after 90 days of Qualified LTC Services. The days do not have to be consecutive but they can not be separated by more than 15 consecutive days.

**Annual premium amount for Comprehensive Long-Term Care Policy  
with a \$100 daily benefit amount.**

30 Day Elimination Period.			90 Day Elimination Period.			90 Day Elimination Period.		
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit			Lifetime Benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	\$401	\$992	\$373	\$918		\$624	\$1,426	
55	\$521	\$1,168	\$473	\$1,078		\$817	\$1,715	
60	\$736	\$1,467	\$665	\$1,348		\$1,165	\$2,246	
65	\$1,052	\$1,912	\$948	\$1,740		\$1,680	\$3,024	
70	\$1,875	\$2,976	\$1,682	\$2,692		\$2,883	\$4,643	
75	\$3,090	\$4,607	\$2,737	\$4,116		\$4,820	\$7,046	
80	\$5,529	\$7,433	\$4,804	\$6,518		\$8,279	\$11,167	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Tax Qualified.

**Maximum Policy Benefit Amounts**

- ☐ 1 Yr.      ☐ 2 Yrs.      ☒ 3 Yrs.      ☐ 4 Yrs.  
☒ 5 Yrs.      ☐ 6 Yrs.      ☐ 7 Yrs.      ☒ Lifetime  
☐ See company's notes, pp 103-121

**Elimination Periods**

- ☒ 0 days      ☐ 60 days      ☐ TYPE  
☐ 20 days      ☒ 90 days      ☐ Calendar Day  
☒ 30 days      ☐ 100 days      ☒ Service Day

**Nursing Home Daily Benefit Amounts**

\$50 minimum to \$300 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day      ☐ per week      ☐ per month  
☐ See notes, pp 103-121      ☐ Not Available

**Inflation Protection**

- ☒ 5% Compound      ☐ Guaranteed Purchase Option  
☒ 5% Simple      ☒ See company's notes, pp 103-121

**Home Care Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ 60%      ☐ 50%  
☐ See company's notes, pp 103-121

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ See company's notes, pp 103-121

**Waiver of Premium**

Provided after confinement in a nursing facility or residential care facility for a period of 90 days, days need not be consecutive.

**Annual premium amount for Comprehensive Long-Term Care Policy  
with a \$100 daily benefit amount.**

30 Day Elimination Period.			90 Day Elimination Period.			90 Day Elimination Period.		
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit			Lifetime Benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	\$289	\$650	\$251	\$565		\$386	\$869	
55	\$352	\$703	\$306	\$612		\$470	\$941	
60	\$452	\$791	\$393	\$688		\$605	\$1,058	
65	\$854	\$1,281	\$743	\$1,114		\$1,142	\$1,714	
70	\$1,457	\$2,112	\$1,267	\$1,837		\$1,949	\$2,826	
75	\$2,311	\$3,235	\$2,009	\$2,813		\$3,091	\$4,328	
80	\$4,320	\$5,832	\$3,756	\$5,071		\$5,779	\$7,802	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Tax Qualified.

**Maximum Policy Benefit Amounts**

- ☐ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☒ 4 Yrs.  
☒ 5 Yrs.      ☒ 6 Yrs.      ☐ 7 Yrs.      ☒ Lifetime  
☒ See company's notes, pp 103-121

**Elimination Periods**

- ☒ 0 days      ☒ 60 days      **TYPE**  
☐ 20 days      ☒ 90 days      ☐ Calendar Day  
☒ 30 days      ☐ 100 days      ☒ Service Day

**Nursing Home Daily Benefit Amounts**

\$50 minimum to \$300 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day      ☐ per week      ☐ per month  
☒ See notes, pp 103-121      ☐ Not Available

**Inflation Protection**

- ☒ 5% Compound      ☐ Guaranteed Purchase Option  
☒ 5% Simple      ☒ See company's notes, pp 103-121

**Home Care Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☒ 90%      ☒ 80%      ☒ 75%  
☒ 70%      ☒ 60%      ☒ 50%  
☒ See company's notes, pp 103-121

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☒ 90%      ☒ 80%      ☒ 75%  
☒ 70%      ☒ See company's notes, pp 103-121

**Waiver of Premium**

Waiver available for NF, RCF, HHC w/ prem waived for life if NF-confined for 180 consec. days. Joint Waiver (spouse prem waived while insured NF-confined) and Survivorship (sps. prem waived for life upon death of insured) available to couples at add'l premium.

### Annual premium amount for Comprehensive Long-Term Care Policy with a \$100 daily benefit amount.

30 Day Elimination Period.			90 Day Elimination Period.			90 Day Elimination Period.		
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit			Lifetime Benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	\$584	\$1,670	\$479	\$1,372		\$988	\$2,827	
55	\$742	\$1,976	\$609	\$1,622		\$1,147	\$3,054	
60	\$920	\$2,213	\$755	\$1,818		\$1,552	\$3,735	
65	\$1,296	\$2,720	\$1,064	\$2,234		\$2,328	\$4,887	
70	\$2,027	\$3,653	\$1,665	\$3,001		\$3,686	\$6,643	
75	\$3,412	\$5,304	\$2,803	\$4,356		\$6,702	\$10,419	
80	\$0	\$0	\$4,760	\$6,598		\$0	\$0	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Tax Qualified.

**Maximum Policy Benefit Amounts**

- ☐ 1 Yr.    ☐ 2 Yrs.    ☒ 3 Yrs.    ☒ 4 Yrs.  
☒ 5 Yrs.    ☒ 6 Yrs.    ☐ 7 Yrs.    ☒ Lifetime  
☒ See company's notes, pp 103-121

**Elimination Periods**

- ☒ 0 days    ☒ 60 days    **TYPE**  
☐ 20 days    ☒ 90 days    ☐ Calendar Day  
☒ 30 days    ☐ 100 days    ☒ Service Day

**Nursing Home Daily Benefit Amounts**

\$50 minimum to \$400 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day    ☐ per week    ☐ per month  
☒ See notes, pp 103-121    ☐ Not Available

**Inflation Protection**

- ☒ 5% Compound    ☒ Guaranteed Purchase Option  
☒ 5% Simple    ☒ See company's notes, pp 103-121

**Home Care Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%    ☐ 90%    ☐ 80%    ☐ 75%  
☐ 70%    ☐ 60%    ☒ 50%  
☐ See company's notes, pp 103-121

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%    ☐ 90%    ☐ 80%    ☐ 75%  
☒ 70%    ☐ See company's notes, pp 103-121

**Waiver of Premium**

Standard Waiver available under NH, ALF & HHC. Lifetime waiver available under NH. Joint Waiver and Survivorship available for extra premium.

### Annual premium amount for Comprehensive Long-Term Care Policy with a \$100 daily benefit amount.

30 Day Elimination Period.			90 Day Elimination Period.			90 Day Elimination Period.	
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit			Lifetime Benefit	
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection
50	\$603	\$1,742	\$501	\$1,446		\$1,043	\$3,013
55	\$766	\$2,061	\$636	\$1,711		\$1,210	\$3,255
60	\$950	\$2,308	\$789	\$1,916		\$1,638	\$3,981
65	\$1,338	\$2,837	\$1,111	\$2,355		\$2,457	\$5,209
70	\$2,094	\$3,811	\$1,738	\$3,164		\$3,890	\$7,080
75	\$3,524	\$5,532	\$2,926	\$4,594		\$7,073	\$11,105
80	\$0	\$0	\$4,970	\$6,958		\$0	\$0

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Tax Qualified.

**Maximum Policy Benefit Amounts**

- ☐ 1 Yr. ☒ 2 Yrs. ☒ 3 Yrs. ☒ 4 Yrs.  
☒ 5 Yrs. ☒ 6 Yrs. ☐ 7 Yrs. ☒ Lifetime  
☐ See company's notes, pp 103-121

**Elimination Periods**

- ☐ 0 days ☒ 60 days   
☒ 20 days ☒ 90 days ☐ Calendar Day  
☒ 30 days ☐ 100 days ☒ Service Day

**Nursing Home Daily Benefit Amounts**

\$1500 minimum to \$8000 maximum per [day, week or month] offered in increments of \$100.

- ☐ per day ☐ per week ☒ per month  
☐ See notes, pp 103-121 ☐ Not Available

**Inflation Protection**

- ☒ 5% Compound ☐ Guaranteed Purchase Option  
☒ 5% Simple ☐ See company's notes, pp 103-121

**Home Care Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100% ☐ 90% ☒ 80% ☐ 75%  
☐ 70% ☒ 60% ☐ 50%  
☐ See company's notes, pp 103-121

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100% ☐ 90% ☐ 80% ☐ 75%  
☐ 70% ☐ See company's notes, pp 103-121

**Waiver of Premium**

After satisfaction of the Elimination Period and receiving benefits, premium will be waived. Premium paid for the Elimination Period will be refunded.

**Annual premium amount for Comprehensive Long-Term Care Policy  
with a \$100 daily benefit amount.**

30 Day Elimination Period.			90 Day Elimination Period.			90 Day Elimination Period.		
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit			Lifetime Benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	\$425	\$1,059	\$354	\$882		\$677	\$1,685	
55	\$521	\$1,158	\$425	\$965		\$812	\$1,803	
60	\$745	\$1,445	\$621	\$1,204		\$1,124	\$2,181	
65	\$1,166	\$2,029	\$972	\$1,691		\$1,691	\$2,943	
70	\$1,879	\$2,932	\$1,566	\$2,443		\$2,695	\$4,205	
75	\$3,110	\$4,354	\$2,591	\$3,628		\$4,406	\$6,168	
80	Not Available	Not Available	\$4,106	\$5,296		\$6,921	\$8,928	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Tax Qualified.

### Maximum Policy Benefit Amounts

- ☐ 1 Yr.    ☒ 2 Yrs.    ☒ 3 Yrs.    ☒ 4 Yrs.  
☒ 5 Yrs.    ☒ 6 Yrs.    ☐ 7 Yrs.    ☒ Lifetime  
☐ See company's notes, pp 103-121

### Elimination Periods

- ☐ 0 days    ☒ 60 days    ☐ TYPE  
☒ 20 days    ☒ 90 days    ☐ Calendar Day  
☒ 30 days    ☐ 100 days    ☒ Service Day

### Nursing Home Daily Benefit Amounts

\$1500 minimum to \$8000 maximum per [day, week or month] offered in increments of \$100.

- ☐ per day    ☐ per week    ☒ per month  
☐ See notes, pp 103-121    ☐ Not Available

### Inflation Protection

- ☒ 5% Compound    ☐ Guaranteed Purchase Option  
☒ 5% Simple    ☐ See company's notes, pp 103-121

### Home Care Benefit Amounts

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%    ☐ 90%    ☒ 80%    ☐ 75%  
☐ 70%    ☒ 60%    ☐ 50%  
☐ See company's notes, pp 103-121

### Residential Care Facility Daily Benefit Amounts

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%    ☐ 90%    ☐ 80%    ☐ 75%  
☐ 70%    ☐ See company's notes, pp 103-121

### Waiver of Premium

After satisfaction of the Elimination Period and receiving benefits, premium will be waived. Premium paid for the Elimination Period will be refunded.

## Annual premium amount for Comprehensive Long-Term Care Policy with a \$100 daily benefit amount.

30 Day Elimination Period.			90 Day Elimination Period.			90 Day Elimination Period.		
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit			Lifetime Benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	\$675	\$1,682	\$563	\$1,402		\$1,169	\$2,912	
55	\$865	\$1,920	\$721	\$1,600		\$1,496	\$3,321	
60	\$1,283	\$2,488	\$1,069	\$2,074		\$2,213	\$4,294	
65	\$2,026	\$3,524	\$1,688	\$2,937		\$3,498	\$6,087	
70	\$3,060	\$4,774	\$2,550	\$3,978		\$5,324	\$8,305	
75	\$4,767	\$6,674	\$3,973	\$5,562		\$8,346	\$11,685	
80	Not Available	Not Available	\$5,860	\$7,560		\$12,510	\$16,138	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Non-Tax Qualified.

**Maximum Policy Benefit Amounts**

- ☒ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☒ 4 Yrs.  
☒ 5 Yrs.      ☒ 6 Yrs.      ☐ 7 Yrs.      ☒ Lifetime  
☒ See company's notes, pp 103-121

**Elimination Periods**

- ☒ 0 days      ☒ 60 days      **TYPE**  
☐ 20 days      ☒ 90 days      ☐ Calendar Day  
☒ 30 days      ☐ 100 days      ☒ Service Day

**Nursing Home Daily Benefit Amounts**

\$50 minimum to \$300 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day      ☐ per week      ☐ per month  
☒ See notes, pp 103-121      ☐ Not Available

**Inflation Protection**

- ☒ 5% Compound      ☐ Guaranteed Purchase Option  
☒ 5% Simple      ☒ See company's notes, pp 103-121

**Home Care Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ 60%      ☒ 50%  
☐ See company's notes, pp 103-121

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ See company's notes, pp 103-121

**Waiver of Premium**

Premiums waived after 90 days of receiving covered services, regardless if the elimination period has been satisfied. Premium is waived for the entire policy, including any attached riders and spouse's premium if covered under the same policy.

### Annual premium amount for Comprehensive Long-Term Care Policy with a \$100 daily benefit amount.

30 Day Elimination Period.			90 Day Elimination Period.			90 Day Elimination Period.	
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit			Lifetime Benefit	
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection
50	\$457	\$1,203	\$411	\$1,082		\$726	\$2,031
55	\$606	\$1,515	\$544	\$1,362		\$957	\$2,517
60	\$865	\$1,980	\$778	\$1,780		\$1,349	\$3,218
65	\$1,304	\$2,655	\$1,172	\$2,386		\$2,000	\$4,233
70	\$2,102	\$3,743	\$1,889	\$3,365		\$3,170	\$5,872
75	\$3,375	\$5,348	\$3,034	\$4,807		\$4,946	\$8,122
80	\$5,248	\$7,812	\$4,717	\$7,022		\$0	\$0

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Non-Tax Qualified.

**Maximum Policy Benefit Amounts**

- ☐ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☒ 4 Yrs.  
☐ 5 Yrs.      ☐ 6 Yrs.      ☐ 7 Yrs.      ☒ Lifetime  
☒ See company's notes, pp 103-121

**Elimination Periods**

- ☒ 0 days      ☐ 60 days      **TYPE**  
☐ 20 days      ☒ 90 days      ☐ Calendar Day  
☒ 30 days      ☐ 100 days      ☐ Service Day

**Nursing Home Daily Benefit Amounts**

\$50 minimum to \$250 maximum per [day, week or month] offered in increments of \$5.

- ☒ per day      ☐ per week      ☐ per month  
☒ See notes, pp 103-121      ☐ Not Available

**Inflation Protection**

- ☒ 5% Compound      ☒ Guaranteed Purchase Option  
☒ 5% Simple      ☐ See company's notes, pp 103-121

**Home Care Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☒ 90%      ☒ 80%      ☒ 75%  
☒ 70%      ☒ 60%      ☒ 50%  
☒ See company's notes, pp 103-121

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ See company's notes, pp 103-121

**Waiver of Premium**

Premiums waived after 91 consecutive service days.

### Annual premium amount for Comprehensive Long-Term Care Policy with a \$100 daily benefit amount.

30 Day Elimination Period.			90 Day Elimination Period.			90 Day Elimination Period.		
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit			Lifetime Benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	\$321	\$661	\$288	\$593		\$494	\$1,017	
55	\$402	\$829	\$360	\$743		\$618	\$1,275	
60	\$614	\$1,262	\$550	\$1,131		\$876	\$1,801	
65	\$1,017	\$1,974	\$911	\$1,768		\$1,280	\$2,484	
70	\$1,862	\$3,313	\$1,667	\$2,967		\$2,141	\$3,810	
75	\$3,540	\$5,594	\$3,171	\$5,010		\$3,864	\$6,106	
80	Not Available	Not Available	Not Available	Not Available		Not Available	\$0	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.



This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Non-Tax Qualified.

**Maximum Policy Benefit Amounts**

- ☐ 1 Yr.    ☐ 2 Yrs.    ☒ 3 Yrs.    ☐ 4 Yrs.  
☒ 5 Yrs.    ☐ 6 Yrs.    ☐ 7 Yrs.    ☒ Lifetime  
☐ See company's notes, pp 103-121

**Elimination Periods**

- ☒ 0 days    ☐ 60 days    **TYPE**  
☐ 20 days    ☒ 90 days    ☐ Calendar Day  
☒ 30 days    ☐ 100 days    ☒ Service Day

**Nursing Home Daily Benefit Amounts**

\$50 minimum to \$250 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day    ☐ per week    ☐ per month  
☐ See notes, pp 103-121    ☐ Not Available

**Inflation Protection**

- ☒ 5% Compound    ☐ Guaranteed Purchase Option  
☐ 5% Simple    ☒ See company's notes, pp 103-121

**Home Care Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%    ☐ 90%    ☐ 80%    ☐ 75%  
☐ 70%    ☐ 60%    ☒ 50%  
☐ See company's notes, pp 103-121

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%    ☐ 90%    ☐ 80%    ☐ 75%  
☐ 70%    ☐ See company's notes, pp 103-121

**Waiver of Premium**

After confinement in a Nursing Facility or Residential Care Facility for a period of 60 days; days need not be consecutive.

### Annual premium amount for Comprehensive Long-Term Care Policy with a \$100 daily benefit amount.

30 Day Elimination Period.			90 Day Elimination Period.			90 Day Elimination Period.		
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit			Lifetime Benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	\$312	\$795	\$284	\$723		\$405	\$1,033	
55	\$416	\$873	\$378	\$794		\$540	\$1,134	
60	\$624	\$998	\$567	\$907		\$810	\$1,296	
65	\$970	\$1,455	\$882	\$1,323		\$1,260	\$1,890	
70	\$1,663	\$2,328	\$1,512	\$2,117		\$2,160	\$3,024	
75	\$2,703	\$3,514	\$2,457	\$3,194		\$3,510	\$4,563	
80	\$4,782	\$5,977	\$4,347	\$5,434		\$6,210	\$7,762	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Non-Tax Qualified.

### Maximum Policy Benefit Amounts

- ☐ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☒ 4 Yrs.  
☒ 5 Yrs.      ☐ 6 Yrs.      ☐ 7 Yrs.      ☒ Lifetime  
☐ See company's notes, pp 103-121

### Elimination Periods

- ☒ 0 days      ☐ 60 days      ☐ TYPE  
☐ 20 days      ☐ 90 days      ☐ Calendar Day  
☒ 30 days      ☐ 100 days      ☒ Service Day

### Nursing Home Daily Benefit Amounts

\$50 minimum to \$300 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day      ☐ per week      ☐ per month  
☐ See notes, pp 103-121      ☐ Not Available

### Inflation Protection

- ☒ 5% Compound      ☒ Guaranteed Purchase Option  
☐ 5% Simple      ☒ See company's notes, pp 103-121

### Home Care Benefit Amounts

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☐ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ 60%      ☐ 50%  
☒ See company's notes, pp 103-121

### Residential Care Facility Daily Benefit Amounts

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ See company's notes, pp 103-121

### Waiver of Premium

Nursing and Residential Care Facilities Waiver: Premiums will be waived when we begin paying benefits and premium payments will resume following the date we stop paying benefits. Home Care Waiver: After paying benefits on a regular basis ( twelve or more days per month) premiums will be waived until benefits are no longer being paid on a regular basis.

**Annual premium amount for Comprehensive Long-Term Care Policy  
with a \$100 daily benefit amount.**

30 Day Elimination Period.			30** Day Elimination Period.		30** Day Elimination Period.	
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit		Lifetime Benefit	
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection
50	\$560	\$1,250	Not Available	Not Available	Not Available	Not Available
55	\$630	\$1,340	Not Available	Not Available	Not Available	Not Available
60	\$880	\$1,660	Not Available	Not Available	Not Available	Not Available
65	\$1,380	\$2,460	Not Available	Not Available	Not Available	Not Available
70	\$2,230	\$3,740	Not Available	Not Available	Not Available	Not Available
75	\$3,830	\$6,050	Not Available	Not Available	Not Available	Not Available
80	\$6,240	\$9,240	Not Available	Not Available	Not Available	Not Available

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Non-Tax Qualified.

### Maximum Policy Benefit Amounts

- ☒ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☐ 4 Yrs.  
☒ 5 Yrs.      ☐ 6 Yrs.      ☐ 7 Yrs.      ☒ Lifetime  
☐ See company's notes, pp 103-121

### Elimination Periods

- ☒ 0 days      ☐ 60 days      ☐ TYPE  
☒ 20 days      ☒ 90 days      ☐ Calendar Day  
☐ 30 days      ☐ 100 days      ☒ Service Day

### Nursing Home Daily Benefit Amounts

\$40 minimum to \$300 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day      ☐ per week      ☐ per month  
☐ See notes, pp 103-121      ☐ Not Available

### Inflation Protection

- ☒ 5% Compound      ☒ Guaranteed Purchase Option  
☒ 5% Simple      ☒ See company's notes, pp 103-121

### Home Care Benefit Amounts

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ 60%      ☒ 50%  
☐ See company's notes, pp 103-121

### Residential Care Facility Daily Benefit Amounts

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ See company's notes, pp 103-121

### Waiver of Premium

For Confined Care, prems are waived after 90 consecutive day of confinement beyond the Elim Period. For Home Care, prems are waived after covered home care services are rec'd on a regular basis (at least 3 days out of every 7) for 90 consecutive days beyond the Elim Pd.

## Annual premium amount for Comprehensive Long-Term Care Policy with a \$100 daily benefit amount.

20* Day Elimination Period.			90 Day Elimination Period.			90 Day Elimination Period.		
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit			Lifetime Benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	\$499	\$1,543	\$416	\$1,287		\$695	\$2,147	
55	\$776	\$1,964	\$643	\$1,627		\$1,016	\$2,571	
60	\$1,116	\$2,366	\$923	\$1,956		\$1,366	\$2,895	
65	\$1,574	\$2,850	\$1,303	\$2,359		\$1,862	\$3,371	
70	\$2,416	\$4,034	\$1,968	\$3,287		\$2,762	\$4,613	
75	\$4,171	\$6,757	\$3,368	\$5,457		\$4,673	\$7,570	
80	\$0	\$0	\$5,832	\$8,340		\$8,266	\$11,820	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Non-Tax Qualified.

### Maximum Policy Benefit Amounts

- ☐ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☒ 4 Yrs.  
☒ 5 Yrs.      ☐ 6 Yrs.      ☐ 7 Yrs.      ☒ Lifetime  
☐ See company's notes, pp 103-121

### Elimination Periods

- ☒ 0 days      ☐ 60 days      ☐ TYPE  
☐ 20 days      ☐ 90 days      ☐ Calendar Day  
☒ 30 days      ☐ 100 days      ☒ Service Day

### Nursing Home Daily Benefit Amounts

\$50 minimum to \$300 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day      ☐ per week      ☐ per month  
☐ See notes, pp 103-121      ☐ Not Available

### Inflation Protection

- ☒ 5% Compound      ☐ Guaranteed Purchase Option  
☐ 5% Simple      ☒ See company's notes, pp 103-121

### Home Care Benefit Amounts

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☐ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ 60%      ☐ 50%  
☒ See company's notes, pp 103-121

### Residential Care Facility Daily Benefit Amounts

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ See company's notes, pp 103-121

### Waiver of Premium

Nursing and Residential Care Facilities Waiver: Premiums will be waived when we begin paying benefits and premium payments will resume following the date we stop paying benefits. Home Care Waiver: After paying benefits on a regular basis ( twelve or more days per month) premiums will be waived until benefits are no longer being paid on a regular basis.

**Annual premium amount for Comprehensive Long-Term Care Policy  
with a \$100 daily benefit amount.**

30 Day Elimination Period.			30** Day Elimination Period.		30** Day Elimination Period.	
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit		Lifetime Benefit	
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection
50	\$560	\$1,250	Not Available	Not Available	Not Available	Not Available
55	\$630	\$1,340	Not Available	Not Available	Not Available	Not Available
60	\$880	\$1,660	Not Available	Not Available	Not Available	Not Available
65	\$1,380	\$2,460	Not Available	Not Available	Not Available	Not Available
70	\$2,230	\$3,740	Not Available	Not Available	Not Available	Not Available
75	\$3,830	\$6,050	Not Available	Not Available	Not Available	Not Available
80	\$6,240	\$9,240	Not Available	Not Available	Not Available	Not Available

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Non-Tax Qualified.

**Maximum Policy Benefit Amounts**

- ☐ 1 Yr. ☒ 2 Yrs. ☒ 3 Yrs. ☒ 4 Yrs.  
☒ 5 Yrs. ☐ 6 Yrs. ☐ 7 Yrs. ☒ Lifetime  
☐ See company's notes, pp 103-121

**Elimination Periods**

- ☐ 0 days ☐ 60 days   
☒ 20 days ☒ 90 days ☐ Calendar Day  
☐ 30 days ☐ 100 days ☒ Service Day

**Nursing Home Daily Benefit Amounts**

\$50 minimum to \$300 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day ☐ per week ☐ per month  
☐ See notes, pp 103-121 ☐ Not Available

**Inflation Protection**

- ☒ 5% Compound ☒ Guaranteed Purchase Option  
☒ 5% Simple ☒ See company's notes, pp 103-121

**Home Care Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100% ☒ 90% ☒ 80% ☐ 75%  
☒ 70% ☒ 60% ☒ 50%  
☐ See company's notes, pp 103-121

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100% ☐ 90% ☐ 80% ☐ 75%  
☐ 70% ☐ See company's notes, pp 103-121

**Waiver of Premium**

If the optional Enhancement rider is attached to the policy, then premiums are waived as soon as benefits are paid under the Nursing Home or Home Care benefit. If the rider is not attached, then premiums are waived once benefits have been paid for 90 days for Nursing Home or Home Care service. This requirement must be satisfied once for each period of care.

**Annual premium amount for Comprehensive Long-Term Care Policy  
with a \$100 daily benefit amount.**

20* Day Elimination Period.			90 Day Elimination Period.			90 Day Elimination Period.		
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit			Lifetime Benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	\$397	\$1,125	\$326	\$922		\$494	\$1,449	
55	\$605	\$1,541	\$496	\$1,263		\$743	\$1,965	
60	\$853	\$1,976	\$699	\$1,619		\$1,034	\$2,490	
65	\$1,291	\$2,670	\$1,058	\$2,188		\$1,544	\$3,325	
70	\$2,021	\$3,719	\$1,657	\$3,048		\$2,390	\$4,599	
75	\$3,533	\$5,741	\$2,896	\$4,706		\$4,168	\$7,089	
80	\$5,791	\$8,464	\$4,747	\$6,938		\$6,795	\$10,341	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Non-Tax Qualified.

**Maximum Policy Benefit Amounts**

- ☐ 1 Yr.      ☐ 2 Yrs.      ☐ 3 Yrs.      ☐ 4 Yrs.  
☐ 5 Yrs.      ☐ 6 Yrs.      ☐ 7 Yrs.      ☒ Lifetime  
☒ See company's notes, pp 103-121

**Elimination Periods**

- ☒ 0 days      ☐ 60 days      ☐ TYPE  
☒ 20 days      ☒ 90 days      ☒ Calendar Day  
☐ 30 days      ☐ 100 days      ☐ Service Day

**Nursing Home Daily Benefit Amounts**

\$50 minimum to \$300 maximum per [day, week or month] offered in increments of \$25.

- ☒ per day      ☐ per week      ☐ per month  
☐ See notes, pp 103-121      ☐ Not Available

**Inflation Protection**

- ☒ 5% Compound      ☒ Guaranteed Purchase Option  
☐ 5% Simple      ☒ See company's notes, pp 103-121

**Home Care Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ 60%      ☐ 50%  
☐ See company's notes, pp 103-121

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ See company's notes, pp 103-121

**Waiver of Premium**

The insured must receive long term care benefits for 90 days before premiums are waived. Waived benefits will continue as long as the insured is receiving long term care benefits.

**Annual premium amount for Comprehensive Long-Term Care Policy  
with a \$100 daily benefit amount.**

20* Day Elimination Period.			90 Day Elimination Period.		90 Day Elimination Period.	
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit		Lifetime Benefit	
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection
50	Not Available	Not Available	Not Available	Not Available	\$312	\$633
55	Not Available	Not Available	Not Available	Not Available	\$341	\$692
60	Not Available	Not Available	Not Available	Not Available	\$455	\$860
65	Not Available	Not Available	Not Available	Not Available	\$774	\$1,324
70	Not Available	Not Available	Not Available	Not Available	\$1,309	\$2,029
75	Not Available	Not Available	Not Available	Not Available	\$2,111	\$2,998
80	Not Available	Not Available	Not Available	Not Available	\$3,502	\$4,762

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

[\* Carrier does not offer a 30-day elimination period.]

This policy form is for Comprehensive Long-Term Care. This is an Individual type policy and is classified as Non-Tax Qualified.

**Maximum Policy Benefit Amounts**

- ☐ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☒ 4 Yrs.  
☒ 5 Yrs.      ☐ 6 Yrs.      ☐ 7 Yrs.      ☒ Lifetime  
☐ See company's notes, pp 103-121

**Elimination Periods**

- ☒ 0 days      ☒ 60 days      **TYPE**  
☐ 20 days      ☒ 90 days      ☒ Calendar Day  
☒ 30 days      ☐ 100 days      ☐ Service Day

**Nursing Home Daily Benefit Amounts**

\$1500 minimum to \$9000 maximum per [day, week or month] offered in increments of \$300.

- ☐ per day      ☐ per week      ☒ per month  
☐ See notes, pp 103-121      ☐ Not Available

**Inflation Protection**

- ☒ 5% Compound      ☒ Guaranteed Purchase Option  
☒ 5% Simple      ☐ See company's notes, pp 103-121

**Home Care Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☒ 75%  
☐ 70%      ☐ 60%      ☐ 50%  
☐ See company's notes, pp 103-121

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ See company's notes, pp 103-121

**Waiver of Premium**

Begin after individual is disabled for 6 months.

### Annual premium amount for Comprehensive Long-Term Care Policy with a \$100 daily benefit amount.

30 Day Elimination Period.			90 Day Elimination Period.			90 Day Elimination Period.		
3 Year Maximum Policy Benefit			3 Year Maximum Policy Benefit			Lifetime Benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	\$497	\$910	\$380	\$693		\$627	\$1,143	
55	\$593	\$1,069	\$452	\$815		\$797	\$1,436	
60	\$813	\$1,440	\$619	\$1,095		\$1,047	\$1,853	
65	\$1,179	\$2,016	\$888	\$1,518		\$1,465	\$2,510	
70	\$1,959	\$3,154	\$1,471	\$2,374		\$2,504	\$4,031	
75	\$3,460	\$5,018	\$2,615	\$3,792		\$4,348	\$6,305	
80	\$5,561	\$5,562	\$4,151	\$5,397		\$6,795	\$8,833	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.